COMBINED DECLAR				ATTORNEY'S DOCKET PU4754USW		
APPLICATION WITH	I POWER (OF ATTORNEY		First Names Inventor:		
				Brian Daniel DOAN Complete if known:		
				App No.:		
() Declaration submitted with initial	filing or					
() Declaration submitted after initial	filing (surcharge r	required 37CFR1.16(e))		Filing Date		
•				Group Art Unit:		
		•				
As below named	d inventor. I here	by declare that:				
My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.			
I believe I am the original (if plural names are listed entitled:	l, first and sole in below) of the su	iventor (if only one name object matter which is cla	ne is listed below) or an original, fairmed and for which a patent is so	first and joint inventor ought on the invention		
PREPARATION O)F STEREOISO	OMERS OF (3 ALPHA/ '2,3-B! FURAN	/BETA, 6 ALPHA/BETA) HEX N-3-0L	KAHYDROFURO		
the specification of which	1 (check only one	e item below):				
[]is attached hereto. OR		•				
[X] was filed on 25 Jun	e 2003 as United	d States application Seria	al No or PCT Inte	ernational		
Application Number PC applicable)	<u>Γ/US03/20094</u> f	filed_and was amended or	on (MM/DD/YYYY)	(if		
I hereby state that I have as amended by any amended	reviewed and und dment specificall	derstand the contents of y referred to above.	the above-identified specification	1, including the claims,		
I acknowledge the duty to	disclose inform	ation which is material to	to patentability as defined in 37 C	CFR §1.56.		
I hereby claim foreign priority ben inventor's certificate or 365(a) of a States of America, listed below and certificate or of any PCT internation	any PCT internati d have also ident onal application h	ional application which o tified below, by checking having a filing date befor	designated at least one country of g the box, any foreign application re that of the application on which	ther than the United n for patent or inventor's		
PRIOR FOREIGN AND ANY P		· · · · · · · · · · · · · · · · · · ·				
Prior Foreign Application Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED		
1.	~~~					
2. 3.						
4						
4. 5.						
I hereby claim the benefit under Ti	itle 35, United St	rates Code §119(e) of an	v United States provisional applie	cation(s) listed below:		
Application No.	1		(MM/DD/YYYY)	battoria, notes, outow.		
1. 60/392,677	1. 60/392,677					
2.						
3	,	<i>t</i>				

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER
PU4754USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PATENTED	PENDING	ABANDONED
		ABANDONED
	7.0	
-	ciated with the	ciated with the Customer Numbers onnected therewith

Address all correspondence and telephone calls to Customer Number 23347

David J. Levy

Corporate Intellectual Property

GlaxoSmithKline

Five Moore Drive, PO Box 13398

Research Triangle Park, NC 27709-3398

Karen L. PRUS 919-483-2192

Direct Telephone Calls to:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
1-200	OF INVENTOR	DOAN	Brian	Daniel
	INVENTOR'S	Signature		
	SIGNATURE	1 / sah-		Date: X 74 Fw 7004
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PÁ	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	-	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	PATTERSON	Daniel	Edward
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0-4	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	ROBERTS	John	C.
1	INVENTOR'S	Signature		Date:
0	SIGNATURE RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	
U	CITIZENSHIP	Durham	NC	COUNTRY OF CITIZENSHIP US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
	ADDICEOS	Five Moore Drive, PO Box 13398	Research Triangle Fark	North Caronna 27709, US
-	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	CECOND CHIEN NA MEGNITIA
2	OF INVENTOR		FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	INVENTOR'S	Signature		Date:
	SIGNATURE			Jan.
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS			

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COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY ATTO PU4 First N						
				Brian Daniel DOAN Complete if know	,,,.	
				App No.:	<u>".</u>	
() Declaration submitted with initial f						
) Declaration submitted after initial filing (surcharge required 37CFR1.16(e))						
				Group Art Unit:		
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As below named	inventor. I here	by declare that:				
My residence, post office	address and citiz	enship are as stated belo	ow next to my name.			
			e is listed below) or an original, aimed and for which a patent is s			
PREPARATION O	F STEREOISO	MERS OF (3 ALPHA) '2,3-B! FURAN	/BETA, 6 ALPHA/BETA) HEX i-3-0L	KAHYDROFURO		
the specification of which (check only one item below):						
[]is attached hereto. OR						
 -	e 2003 as United	States application Seria	al No or PCT Inte	ernational		
Application Number PC7 applicable)	<u>Γ/US03/20094</u> f	ĭled_and was amended o	n (MM/DD/YYYY)	(if		
I hereby state that I have ras amended by any amend			the above-identified specificatio	n, including the claim	ms,	
I acknowledge the duty to	disclose inform	ation which is material t	o patentability as defined in 37 (CFR §1.56.		
inventor's certificate or 365(a) of a States of America, listed below and	I hereby claim foreign priority benefits under 35 U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:					
PRIOR FOREIGN AND ANY P	RIORITY CLA	IMS UNDER 35 U.S.C	C. 119:			
Prior Foreign Application Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))	PRIORI CLAIM		
1.						
2.						
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5.						
I hereby claim the benefit under Ti	tle 35, United St	ates Code §119(e) of an	y United States provisional appl	ication(s) listed belo	w:	
Application No.			(MM/DD/YYYY)			
1. 60/392,677		00	6/27/2002			
2.						

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398 ATTORNEY'S DOCKET NUMBER
PU4754USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

			STATUS (Check	one)
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inverse prosecute this application and to transact all but Customer Number 23347 and Customer Number 23347.	siness in the Patent and Trademark	ners associated with the Office connected therev	Customer Numbers with	provided below to
Address all correspondence and telephone David J. Levy Corporate Intellectual Property GlaxoSmithKline		3347		alls to: a L. PRUS 483-2192

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Į.	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DOAN	Brian	Daniel
1	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		•
- 90	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
- 90	OF INVENTOR	PATTERSON	<u>Daniel</u>	Edward
	INVENTOR'S	Signature Del E. Pet		Date:
	SIGNATURE			Pate: 23/Feb/OV
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	<u>Durham</u>	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	_	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	ROBERTS	John	C.
	INVENTOR'S	Signature		Date:
1	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR			
	INVENTOR'S	Signature		Date:
	SIGNATURE			•
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			
]	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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COMBINED DECLAR	ATTORNEY'S DOCKET					
APPLICATION WITH POWER OF ATTORNEY			PU4754USW First Names Inventor:			
	Brian Daniel DOAN					
			Complete if known:			
			App No.:			
() Declaration submitted with initial	filing or					
() Declaration submitted after initial	filing (surcharge required 37CFR1.16(e))		Filing Date			
			Group Art Unit:			
As below named	d inventor. I hereby declare that:					
My residence, post office	address and citizenship are as stated bel	ow next to my name.				
I believe I am the origina (if plural names are listed entitled:	l, first and sole inventor (if only one named below) of the subject matter which is cl	ne is listed below) or an original, fairned and for which a patent is so	irst and joint inventor ought on the invention			
PREPARATION O	OF STEREOISOMERS OF (3 ALPHA '2,3-B! FURA		AHYDROFURO			
the specification of which	n (check only one item below):					
[]is attached hereto. OR [Y] was filed on 25 Jun	- 2002 on United States application Soci	DOT LA				
[X] was filed on 25 June 2003 as United States application Serial No or PCT International						
Application Number PC applicable)	Application Number PCT/US03/20094 filed_and was amended on (MM/DD/YYYY)(if applicable)					
I hereby state that I have as amended by any amen	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to	o disclose information which is material	to patentability as defined in 37 C	FR §1.56.			
I hereby claim foreign priority benefits under 35 U.S.C. §119 (a)-(d) or §365(b) of any foreign applications(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or of any PCT international application having a filing date before that of the application on which priority is claimed:						
	RIORITY CLAIMS UNDER 35 U.S.C					
Prior Foreign Application Number (s)	Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED			
1.						
2. 3. 4.						
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5.						
	itle 35, United States Code §119(e) of an		cation(s) listed below:			
Application No. 1. 60/392,677		e (MM/DD/YYYY)				
1. 60/392,677 2.	0	6/27/2002				

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER
PU4754USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION O	or PCT PARENT APPLICAT	TION			
			STATUS (Check	one)	
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the practitioners associated with the Customer Numbers provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith Customer Number 23347 and Customer Number 20462					
Address all correspondence and telephone of David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398		<u>347</u>		lls to: L. PRUS 183-2192	
I hereby declare that all statements made he belief are believed to be true; and further the like so made are punishable by fine or impri- jeopardize the validity of the application or	at these statements were made isonment, or both, under 18 U.S.	with the knowledge t	hat willful false st	atements and the	

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DOAN	Brian	Daniel
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
l	CITIZENSHIP	King of Prussia	PA	US
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
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2	OF INVENTOR	PATTERSON	Daniel	Edward
İ	INVENTOR'S	Signature		Date:
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	CITIZENSHIP	Durham	NC	US
1. 4-1. 1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		,
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
- 500	OF INVENTOR	ROBERTS	<u>John</u>	<u>C</u> .
	INVENTOR'S	Signature A		Date: 02 (0
	SIGNATURE	+ Man! Kalos		x 02 Marox
0	RESIDENCE &	2fy.	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Dárham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR			
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS			